

APPENDIX C

Procedures for the Transfer of Patients: Departmental Instruction No. 6

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Procedures for the Transfer of Patients

6 - 1 Background

Requests for transfers between DMHMRSAS facilities, between public facilities and private hospitals, and between State mental health authorities are frequently made in order to

insure patient welfare;

promote family and community support; and

secure the most appropriate type and locus of treatment.

6 - 2 Purpose

This instruction defines the requirements and procedures for the intrastate and interstate transfer of patients to and from the Department's hospitals and training centers, including the following types of transfers:

forensic transfers from other states and federal correctional institutions;

transfers between state facilities;

transfers from private hospitals to state facilities;

transfers from state facilities to private hospitals;

interstate transfers of civil patients/residents with mental health and/or with mental retardation.

6 - 3 Policy

The following policy principles apply in this Instruction.

Patient Desire	The desire and willingness of the patient or resident to be transferred and the expressed interests of family members are primary considerations in the transfer process.
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Patient's Best Interest	The approval of any patient or resident transfer must rest on a clinical determination that the welfare and best interests of the patient or resident would be served.
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**Individualized
Decision-Making**

Intrastate and interstate transfer requests are decided on a case by case basis, taking into account:

expressed interests of the patient or resident and of the family;

the clinical picture and treatment needs; and

security and court of jurisdiction requirements needs of patients with forensic involvement.

**Out-of-State
Residents**

Persons who are mentally ill, mentally retarded or substance dependent whose domicile is not Virginia shall be accorded the same protections related to their admission and hospitalization in a state facility as Virginia residents.

Individuals who are not residents of Virginia should not be denied admission to a state facility based solely on their non-resident status.

**System - to -
System Contact**

The Commissioner is responsible for the interstate transfer of patients or residents entering or exiting Virginia state facilities.

The interstate transfer of patients or residents between public facilities shall occur on a system-to-system basis with all applications and supplemental information being coordinated by the Central Office rather than by individual facilities. The Office of Mental Health Services coordinates interstate transfer for patients with mental illness; the Office of Mental Retardation Services coordinates interstate transfer for residents with mental retardation.

**Return of
Non-Virginia
Residents**

The Code of Virginia authorizes the Commissioner to return patients or residents to their states or countries of origin. Further, the Commissioner may discharge a non-Virginia resident admitted voluntarily to accommodate a resident or patient from Virginia.

**Private, Out-of-
State Hospital
Patients**

Transfers of patients in private, out-of-state hospitals to Virginia State psychiatric facilities are determined on a case by case basis. Consistent with Code §§ 37.1-91; 37.1-100; and 37.1-107, non-residents may not gain admission to Virginia state psychiatric facilities by first being admitted to a Virginia private psychiatric hospital and then seeking transfer to a state facility. Such non-residents shall be handled consistent with the Code provisions which allow the Commissioner the discretion to discharge non-

resident patients when deemed expedient, or when their admission or retention would serve to exclude a Virginia resident.

6 - 4 Definitions

The following definitions apply in this Instruction.

Commissioner	The Commissioner of the Department of Mental Health, Mental Retardation and Substance Abuse Services.
Forensic Patient	An individual who has been court ordered for admission in one of the following legal statuses: Not Guilty by Reason of Insanity, Jail Transfers, Forensic Evaluations, Incompetent to Stand Trial, Virginia Department of Corrections Transfers, Unrestorably Incompetent to Stand Trial with Pending Charges, Department of Youth and Family Services Transfers, or Ten Day Juvenile Treatment Evaluations.
State Treatment Facilities	All training centers and psychiatric hospitals operated by the Department of Mental Health, Mental Retardation and Substance Abuse Services.

6 - 5 Transfer Procedures

The following transfer procedures shall be followed.

Forensic Transfers within the State	<p>Transfers of patients adjudicated Not Guilty by Reason of Insanity (NGRI) from a forensic unit to a civil unit require written approval by the Forensic Review Panel. <u>See <i>NGRI Manual: Guidelines for the Management of Individuals Found Not Guilty by Reason of Insanity</i> for details of this process.</u></p> <p>Transfers of other non-NGRI forensic patients from a forensic unit to a civil unit require written approval from the court of jurisdiction.</p> <p>Individuals in the Forensic Unit who were transferred from the Virginia Department of Corrections at the end of their sentences and after civil commitment shall be treated as civil patients with respect to transfer to a civil facility in their responsible CSB catchment area.</p>
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Periodically, requests are received from other states or from federal treatment facilities to transfer forensic patients into Department-operated facilities. Such individuals may be under pending charges, found Not Guilty by Reason of Insanity, found to be unrestorably incompetent to stand trial, or they are mentally ill individuals convicted of crimes and incarcerated in a state or federal prison system. If they are accepted for treatment within a Department facility, they can be admitted only as voluntary or involuntary patients under the provisions pertaining to Virginia civil commitment, regardless of legal status outside of Virginia.

Requests for transfers of non-Virginia forensic patients into state hospitals will be reviewed in accordance with the guidelines listed below:

- There must be no continuing court jurisdiction that would affect discharge from state hospitalization.
- Transferees must be manageable in the civil units of DMHMRSAS mental health facilities
 - i.e., they do not require secure placement as evidenced by documentation of the absence of violence and escape attempts while hospitalized. A description of the restrictiveness of their current placement should be provided.
- Transfer documents should include a clear, written description of the patient's current legal status, with copies of relevant state and/or federal statutes attached and the current forensic court order.
- There should be documentation of continuing family interest which demonstrates that the family is willing to visit while the patient is hospitalized, work with staff in discharge planning and stay involved with the patient after discharge.
- Any other information deemed relevant.
- All referrals must be approved by the Commissioner of Mental Health, Mental Retardation and Substance Abuse Services.
- Referrals must be forwarded to:
 - Director of Forensic Services
Department of Mental Health, Mental Retardation and
Substance Abuse Services
P.O. Box 1797
Richmond, Virginia 23214

The Interstate Compact on Mental Health and Mental Retardation/ Developmental Disabilities does not apply to the following persons:

- those who are serving a sentence in a penal or correctional institution;
- those awaiting trial on a criminal charge and who are housed in a penal or correctional institution; or
- those who are institutionalized due to the commission of an offense for which, in the absence of mental illness or mental retardation, the person would be subject to incarceration in a penal or correctional institution.

Virginia does not accept admissions into its Forensic Unit from other states or federal jails and prisons.

**Transfers
Between Facilities
within the State
System**

§ 37.1-48 authorizes the Commissioner to order the transfer of patients/residents from one state facility or training center to another. This Departmental Instruction provides for the delegation of this responsibility to the Directors of state facilities and training centers, consistent with the provisions of the Virginia Code § 2.1-20.01:2. Central Office involvement to effect such transfers is not required. Transfers shall be arranged in accordance with the following procedures.

Step	Action
1	<p>The sending facility</p> <ul style="list-style-type: none">■ obtains agreement for the transfer from the receiving facility;■ if the patient is on voluntary status, obtains consent from the patient, the parent (if a minor under age 14), or joint consent of the minor and parent (if minor is age 14 to 18);■ notifies the CSB responsible for the patient;
2	<p>The two facilities collaborate to arrange a date for transfer.</p>
3	<p>The sending hospital is responsible for arranging transportation of the patient to the receiving hospital and assuring that the medical record and a list of the patient's valuables accompanies the patient.</p>

Please Note. Virginia Treatment Center for Children shall follow the above procedures for the purpose of transferring minors admitted through pre-screening by CSBs; i.e., for all public admissions.

**Private Hospital
Transfer of
Involuntarily
Committed
Patients**

§ 37.1-99 allows for the transfer of patients in private hospitals to state facilities by applying to the Commissioner for such transfer. Consistent with Virginia Code § 2.1-20.01:2, this Departmental Instruction authorizes the Directors of state facilities and training centers to receive such application. Central Office involvement to effect such transfers is not required. Transfers shall be arranged in accordance with the following procedures.

Step	Action
1	<p>The sending private hospital</p> <ul style="list-style-type: none"> ■ obtains consent of the patient to be transferred, if the patient is competent to give consent; ■ contacts the receiving state facility and the local Community Services Board to seek agreement for transfer.
2	<p>At the time the patient is actually transferred from the private hospital to the State facility, the transferring hospital must send the <u>original</u> commitment order with staff accompanying the patient. The transferring hospital should retain a copy of the commitment order for its own records.</p>
3	<p>The sending hospital is responsible for arranging the patient's transportation to the state facility.</p>
4	<p>The receiving state facility should check all commitment papers at the time of admission.</p>

Note: Preadmission screening prior to transfer may not be required when such screening has been completed by the community services board prior to admission to the private hospital for which transfer is being sought. In such cases, the community services board shall determine the clinical necessity for a second preadmission screening. Preadmission screening prior to transfer is required when such screening was not conducted prior to admission to the private hospital.

**Private Hospital
Transfer of
Voluntarily
Admitted
Patients**

When a private hospital in Virginia wishes to transfer a voluntary patient to a DMHMRSAS psychiatric facility, Central Office involvement is not required. Transfers shall be arranged in accordance with the following procedures.

Step	Action
1	The sending private hospital obtains consent of the patient to be transferred.
2	contacts the receiving state facility and the local Community Services Board to seek agreement for transfer.
3	arranges the patient's transportation to the state facility.

Note: Preadmission screening prior to transfer may not be required when such screening has been completed by the community services board prior to admission to the private hospital for which transfer is being sought. In such cases, the community services board shall determine the clinical necessity for a second preadmission screening. Preadmission screening prior to transfer is required when such screening was not conducted prior to admission to the private hospital.

**State Hospital
Transfers of
Involuntarily
Committed
Patients**

§ 37.1-78.1 authorizes the Commissioner to transfer patients in state facilities to any hospital and such hospital may retain the patient under the authority of the admission or order applicable to the hospital from which such patient was transferred. This Departmental Instruction provides for the delegation of this responsibility to the Directors of state psychiatric hospitals and training centers, consistent with Code § 2.1-20.01:2. Central Office involvement to effect such transfers is not required. Transfers shall be arranged in accordance with the following procedures.

Step	Action
1	The sending state hospital obtains consent of the patient to be transferred, if the patient is competent to give consent.
2	contacts the receiving private facility or Veterans Administration facility and the local Community Services Board to seek agreement for transfer.
3	arranges the patient's transportation to the willing receiving hospital.

If a competent patient refuses consent for the transfer, a hearing is required to determine the appropriateness of the transfer.

Interstate
Transfer of
Hospitalized
Patients/Residents

When a DMHMRSAS hospital deems it appropriate to transfer a patient to hospital in another state:

Step	Action				
1	<p>For transfer from DMHMRSAS to another state, the state facility</p> <ul style="list-style-type: none"> <input type="checkbox"/> obtains the consent of the patient and/or guardian, (if patient is a minor or incompetent) and a signed release of information; <i>DMHMRSAS Central Office staff will not process an interstate transfer request from a facility if the patient objects to the transfer;</i> <input type="checkbox"/> completes DMH Form 223, "Request for Interstate Transfer"; <input type="checkbox"/> collects and forwards patient information (typed clinical summary; and psychiatric, psychological, medical and psychosocial evaluations completed within the last six months) to the <p style="text-align: center;">Interstate Transfer Coordinator Office of Mental Health/Office of Mental Retardation Virginia Department of Mental Health, Mental Retardation and Substance Abuse Services P. O. Box 1797 Richmond, Virginia 23214</p>				
2	For transfer to Virginia from another state, the Department's transfer coordinator reviews and coordinates the transfer process between the DMHMRSAS facility and the involved mental health or mental retardation authority in the receiving State.				
	<table border="1"> <thead> <tr> <th>If Approved</th><th>If Denied</th></tr> </thead> <tbody> <tr> <td>The written authorization is forwarded to the DMHMRSAS facility for inclusion in the patient's record. A copy of this authorization should also be included in the documents which accompany the patient at the time of actual transfer.</td><td>The state being denied has the right to appeal. In these circumstances the Department's transfer coordinator contacts the appropriate Compact Administrator to discuss the basis for the denial and to convey the reasons why Virginia disagrees, and follows up with additional supporting information.</td></tr> </tbody> </table>	If Approved	If Denied	The written authorization is forwarded to the DMHMRSAS facility for inclusion in the patient's record. A copy of this authorization should also be included in the documents which accompany the patient at the time of actual transfer.	The state being denied has the right to appeal. In these circumstances the Department's transfer coordinator contacts the appropriate Compact Administrator to discuss the basis for the denial and to convey the reasons why Virginia disagrees, and follows up with additional supporting information.
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The written authorization is forwarded to the DMHMRSAS facility for inclusion in the patient's record. A copy of this authorization should also be included in the documents which accompany the patient at the time of actual transfer.	The state being denied has the right to appeal. In these circumstances the Department's transfer coordinator contacts the appropriate Compact Administrator to discuss the basis for the denial and to convey the reasons why Virginia disagrees, and follows up with additional supporting information.				
3	Upon receipt of authorization to transfer, the receiving hospital will collaborate with the sending hospital to arrange a transfer date.				
4	The sending state pays all costs of transporting a patient under the Compact unless a specific agreement is made by two or more member states for a different allocation of costs.				

6 - 6 Private Bed Purchase

Admissions to private hospitals for adult patients involve direct admissions of patients prescreened by CSBs and referred to private hospitals. Should a patient later be transferred to a state facility, the procedures used are those delineated above for "Private Hospital Transfers for Involuntarily Committed Patients" and "Private Hospital Transfers for Voluntarily Admitted Patients".

Admissions to private hospitals for children and adolescents should follow the "Bed Purchase for State Hospitals and VTCC", the children and adolescents procedures dated 12/93. Such admissions are considered direct admissions from CSBs to state facilities. The state facility authorizes a private bed purchase for up to five days when the hospital is above census.

6 - 7 Transportation Costs

The sending hospital or state shall pay for or provide for the cost of transporting a patient to another hospital or returning a patient to his resident state, unless other arrangements have been mutually approved.

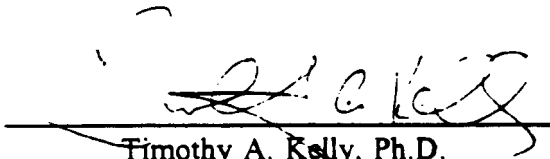
During the transfer, staff shall accompany the patient and will insure that all appropriate physical care needs are met and that the patient's rights are preserved. The patient being transferred should carry personal identification and information on the patient's destination (receiving hospital) in the event the patient is separated from the escort.

6 - 8 Authorities and References

- ☐ Virginia Code Sections 2.1-20.01:2; 37.1-1; 37.1-48; 37.1-65; 37.1-65.1; 37.1-67, et seq 37.1-78.1; 37.1-91; 37.1-99; and 37.1-107 of the Code of Virginia, as amended.
- ☐ *NGRI Manual: Guidelines for the Management of Individuals Found Not Guilty by Reason of Insanity.*
- ☐ Interim Departmental Instruction No. 127, *Implementing Privileges for Forensic Patients.*

6 - 9 Interpretation

For interpretation of the provisions of this Instruction, please contact the appropriate staff within the Division of Facility and Community Services or the Office of Quality Assurance in the Central Office.



Timothy A. Kelly, Ph.D.
Commissioner

This revised instruction replaces Departmental Instruction No. 6, TRANSFER OF PATIENTS OR RESIDENTS dated March 24, 1983.

Effective Date: June 5, 1995